Please type a plus sign (+) inside this box

Address

City

PTO/SB/05 (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION **TRANSMITTAL**

or new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 15685P110 First Inventor Athanasios A. Kasapi, et al.

Title | A SYSTEM AND RELATED METHODS FOR BEAMFORMING IN A Express Wall Esbelly COMMENT

	APPLICATION ELEM	ENTS	T	_		Acciet				=
See MPEP chapter 600 concerning utility patent application contents			Washington, DC 20231				0 966			
	nsmittal Form (e.g., PTO/SB original and a duplicate for fee proce		^{7.} [CD-ROM or CD-F Computer Progra			ge table	or	j
 Applicant claims small entity status. See 37 CFR 1.27. Specification (preferred arrangement set forth below - Descriptive title of the Invention - Cross References to Related Applicat - Statement Regarding Fed sponsored - Reference to sequence listing, a table or a computer program listing append 		Total Pages <u>39</u>] pw) sations d R & D ple,		Nucl (if a _i a. b.	eotide and/or Ami oplicable, all nece Computer F Specification Sec	ino Acid S essary) Readable F quence Lis I or CD-R	equention (Control of the control of	CRF) n: ies); or		
•	Background of the Invention Brief Summary of the Invention		ACCOMPANYING APPLICATION PARTS					_		
- Brief De	scription of the Drawings (<i>if</i>	filed)	9.	7	Assignment Pape	ers (cover	sheet	& docur	nent(s))	—
- Claim(s)	Detailed Description Claim(s) Abstract of the Disclosure		^{10.} [_	37 C.F.R. § 3.73 (when there is an	(b) Statem	ent		Power of Attorney	,
710011401	of the Disclosure		11. E	1. English Translation Document (if applicable)						
	5 O-# D- -		^{12.} [Information Disci Statement (IDS)/	losure			Copies of IDS Citations	
b. Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1 33(b). 6. DApplication Data Sheet. See 37 CFR 1.76		Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Other:								
18. If a CONTINU	ING APPLICATION, check	appropriate box, and s	upply	the			and in	a prelim	inary amendment:	
For CONTINUATION	ation Divisional tion Information: Examine N OR DIVISIONAL APPS only: ed a part of the disclosure of	The entire disclosure of the accompanying contin	the pri-	ior ap n or d y om	ivisional applicatio itted from the subn	Group/A	or dec	laration i	s supplied under ted by reference.	_
		I segui union								
	Number of Bar Code Label	PATENT TRA (Insert Customer No. o				or 🗖	Cor	responde.	nce address below	
Name		·								

State Zip Code Country Telephone (503) 684-6200 Fax (503) 684-3245 Name (Print/Type) Gregory D. Sald Registration No. (Attorney/Agent) 39,926 Signature

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



PTO/SB/17 (10-01)

Approved for use through 10/31/2002 OMB 0551-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

TOTAL	AMOUNT	OF P	AYMENT
-------	--------	------	--------

812.00

Complete if Known				
Application Number		_		
Filing Date				
First Named Inventor	Athanasios A. Kasapi			
Examiner Name	-			
Group/Art Unit				
Attorney Docket No.	15685P110	_		

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEE					
Deposit	Large Entity Small Entity					
Account Number 02-2666	Fee Fee Fee Fee Fee Fee Description Fee F	Paid				
Deposit	Code (\$) Code (\$)					
Account Name Blakely, Sokoloff, Taylor & Zafman LLP	105 130 205 65 Surcharge - late filing fee or oath 127 50 227 25 Surcharge - late provisional filing fee or					
Charge Any Additional Fee(s) Required Under 37 CFR §§ 1 16. 1 17. 1 18 and 1 20	cover sheet.					
••••	139 130 139 130 Non-English specification					
Applicant claims small entity status. See 37 CFR 1 27.	147 2,520 147 2,520 For filing a request for ex parte reexamination 112 920* 112 920*Requesting publication of SIR prior to					
2. Payment Enclosed:	112 920* 112 920*Requesting publication of SIR prior to Examiner action					
Money	113 1,840* 113 1,840*Requesting publication of SIR after					
☐ Check ☐ Credit card ☐ Mortey ☐ Other	Examiner action	_				
FEE CALCULATION	115 110 215 55 Extension for reply within first month 116 400 216 200 Extension for reply within second month					
1. BASIC FILING FEE	116 400 216 200 Extension for reply within second month 117 920 217 460 Extension for reply within third month					
Large Entity Small Entity	118 1,440 218 720 Extension for reply within fourth month					
Fee Fee Fee Fee Description Fee Paid	128 1,960 228 980 Extension for reply within fifth month					
Code (\$) Code (\$)	119 320 219 160 Notice of Anneal					
101 740 201 370 Utility filing fee 740.00 740.00 740.00	120 320 220 160 Filing a brief in support of an appeal					
106 330 206 165 Design filing fee 107 510 207 255 Plant filing fee	121 280 221 140 Request for oral hearing					
108 740 208 370 Reissue filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding					
114 160 214 80 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable					
SUBTOTAL (1) (\$) 740.00	141 1,280 241 640 Petition to revive - unintentional	-				
4 105	142 1,280 242 640 Utility issue fee (or reissue)					
2. EXTRA CLAIM FEES Extra Fee from	143 460 243 230 Design issue fee					
Claims below Tetal Claims 24 - 20 = 4 X 18.00 = \$72.00	144 620 244 310 Plant issue fee					
Independent 3 - 3**= 0 X 84.00 = \$0.00	122 130 122 130 Fetitions to the Commissioner					
Multiple Dependent	125 30 125 30 1 losessing fee dider 57 CFR 1.17(q)					
Large Entity Small Entity	126 180 126 180 Submission of Information Disclosure Stmt					
Fee Fee Fee Fee Description	581 40 581 40 Recording each patent assignment per property (times number of properties)					
Code (\$) Code (\$)	146 740 246 370 Filing a submission after final rejection					
103 18 203 9 Claims in excess of 20	(37 CFR § 1.129(a))					
102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple Dependent claim, if not paid	149 740 249 370 For each additional invention to be examined (37 CFR § 1.129(b))					
104 280 204 140 Multiple Dependent claim, if not paid 109 84 209 42 **Reissue independent claims	d 179 740 279 370 Request for Continued Examination (RCE)					
over original patent	169 900 169 900 Request for expedited examination					
110 18 210 9 **Reissue claims in excess of 20	of a design application					
and over original patent	Other fee (specify) Other fee (specify)					
SUBTOTAL (2) (\$) 72.00	*Deducation Desired F. D. I.					
**or number previously paid, if greater, For Reissues, see below	*Reduced by Basic Filing Fee Paid SUBTOTAL (3)					
SUBMITTED BY	Complete (if applicable)	三				
Name (Print/Type) Gregory D. Caldwell	Registration No. (Attorney/Agent) 39,926 Telephone (503) 684-620	0				
Signature	12/28/01					

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.